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**Bridgewater-Raynham Regional School District**

**Tiered Focused Monitoring Report**

**Continuous Improvement and Monitoring Plan**

**For** **Group A Universal Standards**

**Tier Level** **1**

**Dates of Onsite Visit:** **March 8-9, 2023**

**Date of Final Report:** **June 15, 2023**

**Department of Elementary and Secondary Education Onsite Team Members:**

**Julie Evans, Chairperson**

**Talia Buonopane**



Jeffrey C. Riley

Commissioner of Elementary and Secondary Education

**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

**TIERED FOCUSED MONITORING REPORT**

**BRIDGEWATER-RAYNHAM REGIONAL SCHOOL DISTRICT**

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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

# **TIERED FOCUSED MONITORING REPORT INTRODUCTION**

During the 2022-2023 school year, Bridgewater-Raynham Regional School District participated in a Tiered Focused Monitoring Review (TFM) conducted by the Department’s Office of Public School Monitoring (PSM). The purpose of the Tiered Focused Monitoring Review is to monitor compliance with regulatory requirements focusing on special education and civil rights.

Each school district, charter school, vocational school, and virtual school undergoes a Tiered Focused Monitoring Review every three years. The statewide Tiered Focused Monitoring cycle is posted at <<https://www.doe.mass.edu/psm/tfm/3yrcycle.html>>.

Regularly monitored standards are divided into two groups, known as Group A Universal Standards and Group B Universal Standards. Districts and schools are monitored on an alternate set of Universal Standards every three years.

Group A Universal Standards address:

* Student identification
* IEP development
* Programming and support services
* Equal opportunity

Group B Universal Standards address:

* Licensure and professional development
* Parent/student/community engagement
* Facilities and classroom observations
* Oversight
* Time and learning
* Equal access

The Department has also reserved a specific set of criteria, collectively known as Targeted Standards, employed if LEA or school level risk assessment data indicate there is a potential issue; the identified Targeted Standards are assessed in addition to the Universal Standards.

Universal Standards and Targeted Standards are aligned with the following regulations:

Special Education (SE)

* Selected requirements from the federal Individuals with Disabilities Education Act (IDEA-2004); the federal regulations promulgated under that Act at 34 CFR Part 300; M.G.L. c. 71B, and the Massachusetts Board of Education’s Special Education regulations (603 CMR 28.00), as amended September 20, 2022.

Civil Rights Methods of Administration and Other General Education Requirements (CR)

* Selected federal civil rights requirements, including requirements under the Every Student Succeeds Act (ESSA); Title VI of the Civil Rights Act of 1964; the Equal Educational Opportunities Act of 1974; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; and Title II of the Americans with Disabilities Act of 1990, together with selected state requirements under M.G.L. c. 76, Section 5 as amended by Chapter 199 of the Acts of 2011 and M.G.L. c. 269 §§ 17 through 19.
* Selected requirements from the Massachusetts Board of Education’s Physical Restraint regulations (603 CMR 46.00).
* Selected requirements from the Massachusetts Board of Education’s Student Learning Time regulations (603 CMR 27.00).
* Various requirements under other federal and state laws.

**PSM Team:**

Depending upon the size of a school district and the number of special education programs to be reviewed, a team of one to four Department staff members conducts onsite activities over one to five days in a school district or charter school.

**Tier Level:**

The level of monitoring varies based on tier designation, aligning supports to the level of need and ensuring that districts and schools with greater needs receive appropriate supports to make sustained improvements.

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| Tier | Title | Description |
| 1 | Self-Directed Improvement | Data points indicate no concern on compliance and student outcomes. |
| 2 | Directed Improvement | No demonstrated risk in areas with close link to student outcomes. |
| 3 | Corrective Action | Areas of concern include both compliance and student outcomes. |
| 4 | Cross-unit Support and Corrective Action | Areas of concern have a profound effect on student outcomes and ongoing compliance. |

For the 2022-2023 school year, the tier assignments are based on:

* Annual drop-out rate for students with disabilities
* Five-year cohort graduation rate for students with disabilities
* Public School Monitoring compliance data from the previous review
* Problem Resolution System data, specifically findings of noncompliance
* Special education SPP/APR compliance Indicator data for Indicators 4B, 9 & 10
  + Indicator 4B: Significant discrepancy by race or ethnicity in removal of students with

IEPs greater than 10 days

* + Indicator 9: Overall disproportionate representation of racial and ethnic groups identified

as eligible for special education

* + Indicator 10: Disproportionate representation of racial and ethnic groups within specific

disability categories

* Special education SPP/APR performance Indicator data for Indicators 5 & 6
  + Indicator 5: Education Environments (6-21)
  + Indicator 6: Preschool Environments
* Significant Disproportionality data 2021-2022 & 2022-2023

Tiering adjustments may be made for districts engaged in work with the Department’s Statewide System of Support and have schools identified as requiring assistance and intervention. Tiering assignments may also be adjusted for schools and districts unable to remedy noncompliance within one year of the previous TFM review, as well as for charter schools requiring additional oversight based on conditions of their charter.

**Report: For Tier 1 & 2 Tiered Focused Monitoring Reviews**

Following the onsite visit, the PSM team holds an informal exit meeting to summarize the review for the superintendent or charter school leader. Within approximately 20 business days of the onsite visit, the chairperson forwards the TFM Feedback Summary that includes findings from the Tiered Focused Monitoring Review to the superintendent or charter school leader.

As part of the reporting process, all districts/charter schools in Tiers 1 and 2 then develop a Continuous Improvement and Monitoring Plan (CIMP) for any criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” The CIMP is due to the Department within 20 business days after the issuance of the Feedback Summary and is subject to the Department’s review and approval. The CIMP outlines an action plan, identifies the success metric, describes the measurement mechanism, and provides a completion timeframe to bring those areas into compliance with the controlling statute or regulation. Department staff provide support and assistance to districts and charter schools on the development of a CIMP.

Once the CIMP is approved, it is issued as the Final Report.

Department staff also provide ongoing technical assistance as the school or district is implementing the approved CIMP. **School districts and charter schools must demonstrate effective resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Feedback Summary.**

For more information regarding the TFM Review Process, including district and parent resources, please visit < <https://www.doe.mass.edu/psm/tfm/default.html>>.

# **TIERED FOCUSED MONITORING FINAL REPORT**

**for Bridgewater-Raynham Regional Schools**

The Massachusetts Department of Elementary and Secondary Education conducted a Tiered Focused Monitoring Review in the Bridgewater-Raynham Regional School District during the week of March 6, 2023, to evaluate the implementation of Group A Universal Standards in the program areas of special education, civil rights, and other related general education requirements. The team appreciated the opportunity to interview staff and parents, to observe classroom facilities, and to review the programs underway in the district.

In preparing this report, the team reviewed extensive written documentation regarding the operation of the district's programs, together with information gathered by means of the following Department program review methods:

**Self-Assessment Phase:**

* District review of special education and civil rights documentation for required elements including document uploads.
* District review of a sample of special education student records selected across grade levels, disability categories, and levels of need.
* District review of student records related to the Indicator Data Collection for Indicators 11, 12, and 13.
* Upon completion of the self-assessment, the district submitted the data to the Department for review.

**On-site Verification Phase:**

* Interviews of administrative, instructional, and support staff consistent with those criteria selected for onsite verification.
* Interviews of parent advisory council (PAC) representative.
* Review of additional documents for special education and civil rights.
* Surveys of parents of students in special education: Parents of students in special education were sent a survey that solicited information regarding their experiences with the district’s implementation of special education programs, related services, and procedural requirements.
* Review of student records for special education: The Department selected a sample of student records from those the district reviewed as part of its self-assessment, as well as records chosen by the Department from the special education student roster. The onsite team conducted this review, using standard Department procedures, to determine whether procedural and programmatic requirements have been met.
* Observations of classrooms and other facilities.

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| The Tiered Focused Monitoring Report includes those criteria that were found by the team to be implemented in a “Commendable” manner, as well as criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” (Refer to the “Definition of Compliance Ratings” section of the report.) Tiered Focused Monitoring Reports do not include criteria receiving a rating of “Implemented” or “Not Applicable.” This will allow the district/school and the Department to focus their efforts on those areas requiring corrective action. Districts are expected to incorporate the corrective actions into their district and school improvement plans, including their professional development plans. |
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# **DEFINITION OF COMPLIANCE RATINGS**

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| **Commendable** | Any requirement or aspect of a requirement implemented in an exemplary manner significantly beyond the requirements of law or regulation. |
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| **Implemented** | The requirement is substantially met in all important aspects. |
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| **Implementation in Progress** | This rating is used for criteria containing new or updated legal requirements; the district has implemented any old requirements contained in the criterion and is training staff or beginning to implement the new requirements in such a way that the onsite team anticipates that the new requirements will be implemented by the end of the school year. |
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| **Partially Implemented** | The requirement, in one or several important aspects, is not entirely met. |
|  | |
| **Not Implemented** | The requirement is totally or substantially not met. |
| **Not Applicable** | The requirement does not apply to the school district or charter school. |

**Bridgewater-Raynham Regional School District**

# **SUMMARY OF COMPLIANCE CRITERIA RATINGS**

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|  | **Universal Standards**  **Special Education** | **Universal Standards**  **Civil Rights and Other General Education Requirements** |
| **IMPLEMENTED** | SE 1, SE 3, SE 3A, SE 6, SE 9, SE 9A, SE 10, SE 11, SE 12,  SE 13, SE 17, SE 18A, SE 19, SE 20, SE 22, SE 25, SE 26,  SE 29, SE 34, SE 35, SE 37,  SE 38, SE 39, SE 40, SE 41,  SE 42, SE 43, SE 48, SE 49 | CR 13, CR 14, CR 18 |
| **PARTIALLY**  **IMPLEMENTED** | SE 2, SE 7, SE 8, SE 14 |  |
| **NOT**  **IMPLEMENTED** | None |  |
| **NOT**  **APPLICABLE** | None |  |

The full list of criteria and information regarding the requirements can be found in Appendix B of the Tiered Focused Monitoring Toolkit available at < <https://www.doe.mass.edu/psm/resources/tfm-toolkit.docx>>.

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# **SUMMARY OF INDICATOR DATA REVIEW**

As part of the self-assessment process for districts or charter schools undergoing a review for Group A Universal Standards, the PSM team reviewed the results of Indicator data submissions for Indicators 11, 12 and 13. The Indicator review is completed prior to the onsite visit and helps inform the scope of the onsite review. For any Indicator data noncompliance found, the district or charter school must develop and implement corrective action that includes correcting noncompliance for the individual students affected by it, addressing the root cause and underlying reasons for the identified noncompliance, and reviewing additional records as evidence that the issues have been corrected and that requirements are being met. The Office of Special Education Programs (OSEP) requires correction of noncompliance within one year of the finding.

The results of the district’s submissions for these Indicators are as follows:

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|  | **Compliant** | **Non-Compliant** | **Not Applicable** |
| **Indicator 11 – Initial**  **Evaluation Timelines** | X |  |  |
| **Indicator 12 – Early**  **Childhood Transition** |  | X |  |
| **Indicator 13 –**  **Secondary Transition** | X |  |  |

The district submitted evidence of corrective action, including additional data sets, to address the non-compliance identified for Indicator 12 The submissions have been reviewed and approved by the Department; no further action is required.

| **CONTINUOUS IMPROVEMENT AND MONITORING PLAN** |
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| **Improvement Area** **1** |
| **Criterion:** SE 2 - Required and optional assessments |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that the district does not always conduct all required assessments for initial and re-evaluations. Specifically, evaluations do not always include an educational assessment completed by a school representative that includes a history of the student's educational progress in the general curriculum (Educational Assessment A) and an assessment completed by a teacher(s) with current knowledge of the student's specific abilities, attention skills, participation behaviors, communication skills, memory, and social skills (Educational Assessment B). |
| **LEA Outcome:** The district will ensure that all required assessments are always completed for initial and re-evaluations. Specifically, the district will ensure an educational assessment is completed by a school representative that includes a history of the student's educational progress in the general curriculum (Educational Assessment A) and an assessment is completed by a teacher(s) with current knowledge of the student's specific abilities, attention skills, participation behaviors, communication skills, memory, and social skills (Educational Assessment B). |
| **Action Plan:** By September 29, 2023, the district will complete the Educational Assessments A and B for the three students identified by the Department and reconvene the Teams to review the results of the evaluations, amending or revising the IEP, as necessary. The district will also review written procedures for completing all required assessments, including educational assessments, and make any necessary changes. The procedures will include an internal tracking and monitoring system to ensure future compliance and administrative oversight.  By November 17, 2023, the district will submit evidence of training for all special education Team chairpersons and other relevant staff on the district's assessment and internal monitoring procedures.  By February 16, 2024, the district will submit the results of a review of a representative sample of initial evaluation and re-evaluation student records to ensure all required educational assessments were completed. For any identified non-compliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Success Metric:** By February 2024 and beyond, the district will ensure that all required assessments are completed, including Educational Assessments A and B, when initial evaluations and re-evaluations are conducted.  Evidence:   * Completed educational assessments, meeting attendance sheets, Notices of Proposed School District Action (N1), and amendments or revised IEPs, if applicable * Written evaluation procedures, including description of internal monitoring system * Training agendas, materials, and attendance sheets * Results of record review * Root cause analysis and corrective action, if necessary |
| **Measurement Mechanism:** Continuing after the completion deadline, the Director of Student Services will conduct internal monitoring each quarter to ensure ongoing compliance. For any records missing required assessments, the district will notify parents to obtain appropriate consent, conduct the assessments, and reconvene the Team to review the assessments and amend or revise the IEP as needed. All relevant staff will be trained on the requirements at the beginning of each school year. |
| **Completion Timeframe:** 02/16/2024 |
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| **Improvement Area 2** |
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| **Criterion:** SE 7 - Transfer of parental rights at age of majority and student participation and consent at the age of majority |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that at least one year prior to the student reaching age 18, the district does not always inform the student and parent/guardian of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday. Additionally, the district does not always obtain consent from students with sole or shared decision-making authority to continue their special education program. |
| **LEA Outcome:** At least one year prior to the student reaching age 18, the district will ensure that the student and parent/guardian are informed of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday. When students reach the age of majority, the district will always obtain consent from students with sole or shared decision-making authority to continue their special education program. |
| **Action Plan:** By September 29, 2023, the district will submit evidence that age of majority transfer of rights information was provided, decision-making documented, and consent obtained, as necessary, for the three students identified by the Department. The district will also submit age of majority written procedures, which will include an internal tracking and monitoring system to ensure future compliance and administrative oversight.  By November 17, 2023, the district will submit evidence of training all relevant staff on the district's age of majority and internal monitoring procedures.  By February 16, 2024, the district will submit the results of a review of five records of students turning 18 within one year and five records of students who have already turned 18 to ensure age of majority procedures are implemented. For any identified noncompliance, the district will submit a root cause analysis and a description of appropriate corrective actions. |
| **Success Metric:** By February 16, 2024, and beyond, at least one year prior to a student reaching the age of 18, the district will always inform the student and parent/guardian of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday. The district will document the student’s decision and obtain consent from all students with sole or shared decision-making authority to continue their special education program.  Evidence:   * Notices, documented decision-making, and consent of the identified students * Written age of majority procedures, including description of internal monitoring system * Agendas, training materials, and attendance sheets * Results of record review * Root cause analysis and corrective actions, if necessary |
| **Measurement Mechanism:** Continuing after the completion deadline, the Director of Student Services will conduct internal monitoring each quarter to ensure ongoing compliance. For any noncompliance identified, the district will conduct a root cause analysis and implement appropriate corrective actions. All relevant staff will be trained on the requirements at the beginning of each school year. |
| **Completion Timeframe:** 02/16/2024 |
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| **Improvement Area 3** |
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| **Criterion:** SE 8 - IEP Team composition and attendance |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that when the Team determines a student is likely to require continuing services from adult human service agencies, the district makes a referral to the Bureau of Transitional Planning in the Executive Office of Health and Human Services, as appropriate. However, when one purpose of the Team meeting is to discuss transition services, with the consent of the parent(s) or student who has reached the age of majority, the district does not always invite a representative of the participating agency that is likely to be responsible for providing or paying for transition services for the referred student. |
| **LEA Outcome:** When one purpose of the Team meeting is to discuss transition services, with the consent of the parent(s) or student who has reached the age of majority, the district will always invite a representative of the participating agency that is likely to be responsible for providing or paying for transition services for the referred student. |
| **Action Plan:** By September 29, 2023, the district will submit IEP Team invitation and attendance procedures, which will include an internal tracking and monitoring system to ensure future compliance and administrative oversight.  By November 17, 2023, the district will submit evidence of training for all relevant staff on the district's IEP Team meeting invitation, attendance, and internal monitoring procedures.  By February 16, 2024, the district will submit the results of a review of 10 applicable records to determine whether appropriate consent was obtained and whether a representative of the participating agency was invited to the Team meeting. For any identified noncompliance, the district will submit a root cause analysis and a description of appropriate corrective actions. |
| **Success Metric:** By February 2024, and beyond, the district will ensure that, when required, appropriate consent is obtained and a representative of the participating agency that is likely to be responsible for providing or paying for transition services for the referred student is invited to the Team meeting.  Evidence:   * Written IEP Team invitation and attendance procedures, including description of internal monitoring system * Training agendas, materials, and sign-in sheets * Results of record review * Root cause analysis and corrective actions, if necessary |
| **Measurement Mechanism:** Continuing after the completion deadline, the Director of Student Services will conduct internal monitoring each quarter to ensure ongoing compliance. For any noncompliance identified, the district will conduct a root cause analysis and implement appropriate corrective actions. Additionally, training will be provided to relevant staff at least annually on IEP Team meeting invitation and attendance; obtaining appropriate parental and/or adult student consent; and inviting public agency representatives, when appropriate. |
| **Completion Timeframe:** 02/16/2024 |
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| **Improvement Area 4** |
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| **Criterion:** SE 14 - Review and revision of IEPs |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that the district does not always hold a Team meeting at least annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP. |
| **LEA Outcome:** The district will ensure that a Team meeting is always held at least annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP. |
| **Action Plan:** By September 29, 2023, the district will conduct an IEP Team meeting for the student identified by the Department. Evidence will include the meeting invitation, signed meeting attendance sheet, Notice of Proposed School District Action (N1), and proposed IEP. The district will also submit written procedures for annually reviewing and revising IEPs, which will include an internal tracking and monitoring system to ensure future compliance and administrative oversight.  By November 17, 2023, the district will submit evidence of training for all relevant staff on the written procedures, requirements, and best practices related to scheduling and conducting annual IEP Team meetings.  By February 16, 2024, the district will submit the results of a review of 10 student records to ensure timelines are met. For any identified noncompliance, the district will submit a root cause analysis and a description of appropriate corrective actions. |
| **Success Metric:** By February 2024 and beyond, the district will ensure that IEP Team meetings are held at least annually, on or before the anniversary date of the IEP, to consider the student's progress and to review, revise, or develop a new IEP.  Evidence:   * Meeting invitation, attendance sheet, N1, and proposed IEP * Written timeline procedures, including description of internal monitoring system * Training materials, agenda, and attendance sheets * Results of record review * Root cause analysis and corrective action plan, if necessary |
| **Measurement Mechanism:** Continuing after the completion deadline, the Director of Student Services will conduct internal monitoring each quarter to ensure ongoing compliance. For any noncompliance identified, the district will conduct a root cause analysis and implement appropriate corrective actions. All relevant staff will be trained on the requirements at the beginning of each school year. |
| **Completion Timeframe:** 02/16/2024 |
|  |